

VOLUNTEER INFORMATION SHEET

Name	
Address	
Telephone number	
Email address	
What skills/areas would you like to help with in school?	
What days of the week or hours would you like to volunteer?	
Are there any particular age groups you would like to work with?	
Do you have any disabilities/ other needs (including pregnancy) that we need to take into account when working as a volunteer in school?	
Signed	
Date	

Please hand this form to reception in an envelope marked for HR or send by email to HR@mayfield.portsmouth.sch.uk